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Psychiatric Rehabilitation Association Certified Child and Family Resiliency Practitioner (CFRP) Sample Questions (Q34-Q39):

NEW QUESTION # 34

For a child whose goal is to make more friends, joining Girl Scouts would be an example of:

- A. Facilitating collaboration.
- B. Practicing interventions.
- C. Maintaining personal wellness.
- **D. Promoting individual choice.**

Answer: D

Explanation:

The Community Integration domain emphasizes connecting children with community resources and activities to support social inclusion and personal goals. According to the PRA CFRP Study Guide 2024-2025, promoting individual choice involves empowering children to select activities that align with their interests and goals, such as joining a group like Girl Scouts to foster social connections.

Option A (Promoting individual choice) is correct because joining Girl Scouts reflects the child's agency in choosing a community-based activity to achieve their goal of making friends. The PRA framework highlights that practitioners should support children in making self-directed choices to enhance engagement and ownership.

Option B (Facilitating collaboration) is incorrect because collaboration refers to coordinating with other providers or stakeholders, not the act of joining a group. The PRA study guide distinguishes collaboration as a systems-level activity.

Option C (Practicing interventions) is incorrect because joining Girl Scouts is a community-based activity, not a clinical intervention. The PRA framework categorizes interventions as targeted therapeutic strategies.

Option D (Maintaining personal wellness) is incorrect because, while social connections support wellness, the primary focus of joining Girl Scouts in this context is social integration, not wellness maintenance per the PRA guidelines.

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Psychiatric Rehabilitation Association, CFRP Study Guide 2024-2025, Section on Community Integration: Empowering Choice.

PRA Certification Candidate Handbook, Competency Domain 3: Community Integration.

PRA Code of Ethics, Principle 3: Respect for Autonomy.

NEW QUESTION # 35

When collaborating with a child, the established goals should be

- **A. specific and measurable.**
- B. general and time-framed.
- C. open-ended and flexible.
- D. precise and confidential.

Answer: A

Explanation:

In the CFRP framework, assessment, planning, and outcomes emphasize collaborative goal-setting with children. Goals established with a child should be specific and measurable to ensure clarity and track progress effectively. The CFRP study guide states, "When collaborating with a child, goals must be specific and measurable to provide clear direction and allow for evaluation of progress toward recovery." Precise and confidential (option A) is partially correct but less accurate, as confidentiality is a separate concern. General and time-framed (option B) or open-ended and flexible (option D) goals lack the precision needed for effective planning and outcomes.

* CFRP Study Guide (Section on Assessment, Planning, and Outcomes): "Collaborative goal-setting with children requires goals to be specific and measurable to ensure clarity and facilitate progress tracking in the recovery process." References:

Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Assessment, Planning, and Outcomes, Goal-Setting Principles.

Psychiatric Rehabilitation Association (PRA) Guidelines on Person-Centered Planning.

NEW QUESTION # 36

Between the ages of five and twelve years, a child is typically

- A. coming to terms with emerging sexuality.
- **B. developing skills and a sense of pride in accomplishments.**
- C. exploring interpersonal skills through initiating activities.
- D. forming an attachment to caregivers and teachers.

Answer: B

Explanation:

Supporting health and wellness in the CFRP framework includes understanding developmental stages.

Between ages five and twelve, children are typically in Erikson's industry vs. inferiority stage, developing skills and a sense of pride in accomplishments through tasks like schoolwork and hobbies. The CFRP study guide notes, "From ages five to twelve, children focus on developing skills and a sense of pride in accomplishments, building competence and self-esteem." Exploring interpersonal skills (option A) is less specific, forming attachments (option C) is more relevant to earlier stages, and emerging sexuality (option D) typically occurs in adolescence.

* CFRP Study Guide (Section on Supporting Health and Wellness): "Children aged five to twelve typically develop skills and pride in accomplishments, aligning with the industry vs. inferiority developmental stage." References:

CFRP Study Guide, Section on Supporting Health and Wellness, Developmental Stages.

Psychiatric Rehabilitation Association (PRA) Guidelines on Child Development.

NEW QUESTION # 37

To encourage a child's self-worth, a practitioner needs to

- A. display sympathy.
- **B. demonstrate empathy.**
- C. reinforce the child's perception.
- D. identify the child's emotions.

Answer: B

Explanation:

Encouraging a child's self-worth is a critical strategy for facilitating recovery in the CFRP framework.

Demonstrating empathy, which involves understanding and validating the child's feelings, fosters a sense of value and self-worth. The CFRP study guide notes, "To encourage a child's self-worth, practitioners must demonstrate empathy, showing genuine understanding of the child's experiences to build their sense of value." Identifying emotions (option A) is a step but less impactful than empathy. Reinforcing perception (option B) may not always be positive, depending on the child's self-view. Displaying sympathy (option D) involves pity and is less empowering than empathy.

* CFRP Study Guide (Section on Strategies for Facilitating Recovery): "Demonstrating empathy is essential for encouraging a child's self-worth, as it validates their experiences and promotes a sense of value and self-esteem." References:

Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Strategies for Facilitating Recovery, Self-Worth Building.

Psychiatric Rehabilitation Association (PRA) Guidelines on Strengths-Based Engagement.

NEW QUESTION # 38

A family is refusing to work with a practitioner, stating they already have too many service providers. They do not want another new person working with their child. What is the BEST course of action for the practitioner to take?

- A. Accept the family's decision and move on to the next referral.
- **B. Coordinate a meeting with the family and all of the service providers.**
- C. Encourage the family to work with the practitioner for at least one month.
- D. Call the other service providers and request they close services with the family.

Answer: B

Explanation:

This question falls under the Systems Competencies domain, which focuses on collaboration with families, service providers, and community systems to support the child's recovery. The PRA CFRP Study Guide 2024-2025 emphasizes that practitioners must prioritize family-centered care and coordinate services to reduce fragmentation and overwhelm, especially when families feel burdened by multiple providers.

Option C (Coordinate a meeting with the family and all of the service providers) is the best course of action.

The PRA guidelines highlight that when a family resists additional services due to provider overload, the practitioner should facilitate collaboration among existing providers to streamline care. Coordinating a meeting allows the practitioner to clarify roles, align goals, and address the family's concerns, fostering trust and reducing redundancy. This approach aligns with the PRA's emphasis on systems integration and family empowerment.

Option A (Accept the family's decision and move on to the next referral) is incorrect because it dismisses the family's needs without

exploring solutions. The PRA Code of Ethics requires practitioners to advocate for families and seek collaborative resolutions rather than disengaging.

Option B (Encourage the family to work with the practitioner for at least one month) is incorrect because it disregards the family's expressed concerns about provider overload. The PRA study guide advises against pressuring families, as this can erode trust and engagement.

Option D (Call the other service providers and request they close services with the family) is incorrect because it oversteps the practitioner's role and disregards the family's autonomy. The PRA framework emphasizes that decisions about service closure should involve the family and be based on their needs, not unilateral action by the practitioner.

References:

Psychiatric Rehabilitation Association, CFRP Study Guide 2024-2025, Section on Systems Competencies:

Collaboration and Service Coordination.

PRA Certification Candidate Handbook, Competency Domain 6: Systems Competencies.

PRA Code of Ethics, Principle 2: Family-Centered Practice.

NEW QUESTION # 39

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